Docket No.: 541-3,2,001

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I her	reby declare that:		
My residence, post office address	and citizenship are as stated belov	w next to my name.	
I believe I am the original, first a matter which is claimed and for v	which a patent is sought on the inv	is listed below) or an original, first vention entitled <u>PILL PRINTING Al</u> ached hereto unless the following is	and joint inventor (if plural names are listed below) of the subject ND IDENTIFICATION checked:
was filed on and was amended on	as United States Application (if applica	Number or PCT International Appable).	dication Number
acknowledge the duty to disclose	information which is material to penefits under Title 35, United State	natentability as defined in Title 37, (cluding the claims, as amended by any amendment referred to above. Code of Federal Regulations, § 1.56, application(s) for patent or having a filing date before that of the
Prior Foreign Application(s):			Priority Claimed
(Number)		(Country)	
I hereby claim the benefit under	Title 35, United States Code, § 11:	9(e) of any United States provisional	application(s) listed below.
60/018,751 (Application Number)		May 31, 1996 (Filing Date)	
this application is not disclosed in duty to disclose information which	n the prior United States applicati	on in the manner provided by the fi efined in Title 37, Code of Federal I	listed below and, insofar as the subject matter of each of the claims of rst paragraph of Title 35, United States Code, § 112, I acknowledge the Regulations, § 1.56 which became available between the filing date of the
08/286,785		August 5, 1994	Pending
(Application Number)		(Filing Date)	(Status - patented, pending, abandoned)
I hereby appoint the following at	ttorney(s) and/or agent(s) to prosec	cute this application and to transact	all business in the Patent and Trademark Office connected therewith:
Robert J. Hess, Reg. N	io. 32,139		
Address all correspondence to:	COBRIN, GITTES & SAMUEL 750 Lexington Avenue New York, New York 10922 (212) 486-4900		
that these statements were made	nts made herein of my own knowledge that willful fa	alse statement and the like so made	s made on information and belief are believed to be true; and further are punishable by fine or imprisonment, or both, under Section 1001 of the application or any patent issued thereon.
Full name of sole of	r first inventor (give	n name, family name)	Scott L. Sullivan
Inventor's signature		-	Date: May 30, 1997
Residence: Chappa			Citizenship: <u>United Stat</u>
Post Office Address	r: 3 Garden Ridge, C	Chappaqua, New York	: 10514
Full name of second	d joint inventor (give	n name, family name	Robert J. Hess
Inventor's signature		Then	Date: May 30, 1997
Residence: Hoboken, New Jersey Citizenship: U			
Post Office Address	s: 205 Hudson Street	Apartment 1101, Ho	boken, New Jersey 07030
Additional inventors	are being named on separately nu	imbered sheets attached hereto.	
	<u> </u>		

Burden Hour Statement: This form is estimated to take 4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Office of Assistance Quality and Enhancement Division, Patent and Trademark Office, Washington, D.C. 20231, and to the Office of information and Regulatory Affairs, Office of Management and Budget (Project 0651-0032), Washington, D.C. 20503. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks, Washington, D.C. 20231.